



scribe
connect
TeamConnect

August 2016

FEATURE STORY

The Surprising Enemy of Workplace Efficiency: Multitasking

by Kasaan Hammon

In any workplace, from manufacturing to medicine, efficiency is key. Getting more done in less time leads to productivity, and productivity leads to a successful business. Getting more done in less time at work also leaves more time to have a life outside of work. Doctor Lynn Ho set out to maximize efficiency in her family practice because she wanted to spend less time completing administrative tasks and more time seeing patients. "It's extremely important to be efficient," Ho says of running her practice. "The less efficient I am, the later I go home. The more efficient I am, the less I work."¹

With efficiency as an essential contributor to business success and personal satisfaction, how to get more done quickly becomes the next question. In today's world, the answer inevitably involves technology. In the world of modern health care, one of the big answers has been the electronic health record (EHR). In the past 20 years, we have seen the dramatic evolution of EHRs from innovation, to mandate, to very soon the norm. Ever since President Bush called for computerized health records in his 2004 State of the Union Address, the EHR revolution kicked into full gear. The paper chart, common practice in medicine since the 1920's, has been replaced with technological solutions in the interest of health care quality, safety, and of course, efficiency.

The question then becomes whether this new technology is actually helping doctors be more efficient. For some, the preliminary answer is no. Many doctors feel that entering data into the EHR, though it is intended to make their lives easier, is instead an attention-demanding and time-consuming task in and of itself. No matter how well-designed the electronic platform, doctors must multitask, jumping between the roles of quality care provider and careful data entry clerk.

And there is a scientific reason why this multitasking doesn't feel so good. Contrary to popular belief, the brain can't actually do two things at once. What appears to be multitasking is really the brain rapidly switching focus between tasks.² This flipping of focus requires mental energy and transition time with every flip. Multitasking creates mental blocks that can reduce productivity by as much as 40% because each individual task takes longer to complete.³ And not only does multitasking slow productivity, but it has been shown to increase stress, increase the rate of errors, increase absentmindedness, and reduce creativity because the brain is not allowed dedicated time to the task at hand. Though most people identify themselves as being able to multitask, in reality only 2% of people are truly capable of multitasking.

(Continued on Page 4)

IN THIS ISSUE



CEO's Message: Efficiency

Understanding the importance of efficiency to best serve clients' needs. (Page 2)



What would YOU do?

Real scenarios to consider and discuss with peers. (Page 4)



7 Places to Volunteer Abroad

Check out these unusual and amazing places to use your skills abroad. (Page 5)

Efficiency

A MESSAGE FROM CEO ERICH REMPEL

Efficiency can sometimes be an elusive target. There are so many things each day that clamor for our attention that it is often difficult to focus on the task at hand. Take a moment and think about your most recent scribe shift. What were some of the distractions that you can identify? Before you can answer that, however, you have to be able to answer what were you being distracted from - what was your primary task at the time? It may have been documenting the patient's history, entering labs, printing discharge instructions or answering the phone. Each of those tasks are necessary. But let us never forget our primary task - to improve provider efficiency.



This overarching responsibility requires you to prioritize, conceptualize and anticipate the needs of your provider. There may be many tasks demanding your attention, but only one task you are able to perform at any one moment. You are a ScribeConnect scribe because you have demonstrated your ability to think on your feet, assess the situation and apply your knowledge and experience to the task at hand. Each day, the work you do helps to improve your provider's efficiency.

The feedback we receive from our clients is incredible to hear. Never lose focus of the task and why you are doing it. You *are* making a difference in the professional and personal lives of the medical professionals, staff and patients in your facility. One day, you will be the medical provider and you will utilize the knowledge and experience you gained as a scribe. Now that's motivation!

Thank you for being part of this great team at ScribeConnect building efficiency for medical providers and healthcare as a whole.

Erich Rempel
CEO ScribeConnect

Quality of the Month: Efficiency

"If I had six hours to cut down a tree, I'd spend the first four hours sharpening the axe."

- Abraham Lincoln

"Efficiency is doing things right; effectiveness is doing the right things."

- Peter Drucker

"Productivity and efficiency can be achieved only step by step with sustained hard work, relentless attention to details, and insistence on the highest standards of quality and performance."

- J.R.D. Tata



SC Spotlight

Melanie Melillo Site Manager, Long Beach, CA

Melanie has been part of the ScribeConnect family since 2014 and manages several sites in the Long Beach area. She is well-known for her organization on the job, always staying on top of where she is in her work flow and what needs to be completed in every chart at all times.

Melanie tells us her favorite part of being a scribe is interacting with the patients. "When the physician introduces me, I love to smile at the patient and watch how they respond. Most of our patients are hurting, frightened, confused or annoyed. I love that something as simple as a smile can help to brighten their day." Melanie loves observing how different physicians comfort and reassure their patients. "Some physicians will take the time to sit on the edge of the bed and listen to their complaints, even in the middle of a busy shift. This is the kind of provider I hope to be in the future."

Melanie understands that being a scribe is a two-way relationship with the physician, and she provides this tip: "Remind the physician about the details of a patient encounter or what orders they needed to put in that may have been forgotten in the midst of the busyness. They are always grateful and appreciate the extra mind on the job." She tells us the greatest compliment she gets at work is when physicians introduce her as their "partner."

We wanted to know more about how Melanie uses organization to stay efficient. She recommends taking the time to organize yourself and know where you are with each patient so that you can finish busy shifts well. She also emphasizes self-reflection and positivity. Melanie says, "I am never satisfied with where I am. There is always something more to be learned and more to be gained. I always want to take my understanding and proficiency to the next level. After leaving a busy shift, if I don't take the time to focus on the positives of what went well, it will be that much harder to return with a good attitude the next day."

Outside of work, Melanie has two dogs and two cats that she absolutely adores and takes way too many pictures of, according to



her. She and her husband love taking the dogs hiking, swimming, and just about anywhere outside. She also enjoys playing sports: biking, swimming, volleyball, soccer, and ultimate frisbee. "You name it, I probably play it. Not well, I might add, but I have fun."

Since we've got efficiency on the brain, we asked Melanie what she would do if she suddenly had a free week. She tells us, "I would return to the Dominican Republic and help Dr. Fernando with his medical clinic. I have twice had the opportunity to serve alongside Dr. Fernando, who is an OB/Gyn who serves as a missionary in his own country bringing medical services to the poor and underserved in the rural areas of this third world country. Because of his education, he had the opportunity to become one of the richest men in the country, but instead he chooses to serve the poorest of the poor. Every time I talk to him, I am inspired to keep working for my dreams, not so I can make a ton of money, but so that I can bless other people with the gifts that God has blessed me with."

Melanie will be graduating from Cal State Long Beach in December and is currently applying to PA school.

Phillip Jo Site Trainer, Long Beach, CA

Phillip joined ScribeConnect in 2015 as a scribe and was promoted to Site Trainer in Long Beach earlier this year. While we know physicians and staff find Phillip very courteous and professional, he is better-known by his colleagues and friends as the "candy guy" because he likes sharing snacks during shifts.

Phillip enjoys his job because he finds it "intriguing and a literal well of knowledge." He tells us, "There is so much to glean from shifts, be it from interactions with doctors, staff, patients, or coworkers. I love that there is always something new to learn or prior knowledge to further expound."

He loves hearing from providers when the charts are fantastic. "Everyone leaves happy," he says. We asked Phillip how he works efficiently to make his charting great. "Be cognizant and focused throughout the entire shift. Come in early to prepare and finish administrative tasks beforehand. Memorize and review the preferences for each provider a few hours before the shift."

Phillip has a Bachelor of Political Science/Economics from UC San Diego, and he is taking post-baccalaureate classes at CSULB. Outside of work and his studies, he enjoys hiking, fishing, and cooking fusion foods. So what would Phillip do if he was suddenly given a free week to do anything and go anywhere? He simply says, "I would visit my sister in New York." What a good brother!



The Surprising Enemy of Workplace Efficiency: Multitasking (continued from page 1)

For the other 98% of us, our abilities and efficiency suffer.⁴

It is no wonder then that doctors are asking how they can take advantage of the technology available without compromising on their efficiency or quality of care. Doctors still want to be present and focused in the exam room, bringing every ounce of their education, experience, and passion for medicine to bear in providing patient care. But they want to get everything documented well, and they need to do it fast so that they can see as many patients as possible.

And it's not just doctors who want efficiency; patients want it, too. "The number one patient complaint is having to wait too long, and these days especially, we can't afford patient dissatisfaction," says Todd L. Beel, MD, a clinical instructor at University of Michigan Medical School. "Most emergency departments have a threshold for LBE's (left before exam) of about one percent. And it's estimated that for every LBE, there are nine patients who either never came because of the wait or came and saw a long wait and went elsewhere. So long waits could result in an ED losing as much as 10 percent of patient volume," says Beel.⁵

Studies like this show that every minute counts, including every minute spent entering data into a chart or tracking down lab results. Many doctors and hospital administrators are turning to the use of medical scribes to make documentation more efficient and maximize the number of patients doctors are able to see per day.

Medical scribes serve a valuable support function by collecting and inputting the data for every patient visit, updating doctors as lab results and X-rays come back, and even doing some callbacks. Alec Nielsen, Director of Implementations for national scribe service provider ScribeConnect, says, "Physicians appreciate the tasks that scribes can take on to speed efficiency, such as charting exams real-time, carrying exam supplies at the ready,

doing patient callbacks, and even facilitating more efficient lines of communication with billing companies."

Hospital administrators and owners of private practices alike look to the numbers to justify the use of scribes. Emergency Physicians Monthly published the following cost-measurement scenario: "Say an ED sees 2.7 patients per hour. The revenue generated per patient (both physician and hospital components) is conservatively \$400 a patient. If it takes 15 minutes out of every hour to do Medicare mandated charting on these patients, then the math says that each minute of time spent in an hour is worth \$18. So, for every minute that you chart and don't see the next patient you lose \$18 in opportunity costs."⁶

The EPM cost analysis goes on to say, "Assuming each patient generates \$100 in physician income, and assuming physicians are seeing 2.5 patients per hour, then to pay for a scribe for one hour at a cost of \$20 requires that 0.2 additional patients be seen: not hard to defend at all. The cost for scribes is even easier to defend when physician satisfaction is taken into consideration. Simply put, they relieve hassles for physicians and make their lives easier."

Entrepreneur and best-selling author Kevin Daum, in his article "8 Things Really Efficient People Do," has one item prominently at the top of his list of recommendations for business leaders: "Stop multitasking."⁷ Or as Judy Bee, a 30-year-veteran medical economics and management consultant, advises doctors: "Only do work that others cannot do." For her clients, Bee explains, "Many patient care functions, such as data collection, can be delegated to trained assistants, freeing doctors to work faster."⁸

The solution to workplace efficiency then lies not so much in getting exceptional workers to take on more tasks simultaneously to drive productivity, but instead it may be in creating a work environment that allows each individual to fill their specific role, focus on that role, and do it exceptionally.

(1) Lynn Ho, MD, "Seven Strategies for Creating a More Efficient Practice," Family Practice Management, September 2007; (2) D. Smith, "Multitasking undermines our efficiency," American Psychological Association, October 2001; (3) Christopher Hann, "The Art of Efficiency: How To Do One Thing at a Time," Entrepreneur, July 2013; (4) Paolo Cardini, "Forget multitasking, try monotasking," TEDGlobal, June 2012; (5) Reference and Resource Guide, "Efficiency in the Emergency Department," ACEP, 2004; (6) "Scribes Hold the Key to ED Efficiency," Emergency Physicians Monthly; (7) Kevin Daum, "8 Things Really Efficient People Do," INC Magazine, November 2013; (8) Judy Bee, "8 Ways to Make Your Practice More Efficient," Medical Economics, September 2012.

WHAT WOULD YOU DO?

Inviting deeper discussion with peers...



ASKING QUESTIONS

How do you address charting questions with your physician? Example: You are walking out of a patient's room, and the physician informs you about the physical exam. You realize you missed some findings. How do you address this? How do you prevent this in the future?

COMMUNICATING UPDATES

How do you communicate updates with your physician? Do you notify them every time a chart is completed? Do you notify them when a CT result or urine result comes back?

EFFICIENT COMMUNICATION

Clinicians in general are all about efficiency. Any questions you have should be straight to the point and short enough that they can answer questions without being distracted from what they are doing. What have you found to be a successful method of communicating efficiently?



Welcome aboard our newest scribes!
Brandy K, Jesse H, Pari V, Tommy D, Trina C (Long Beach, CA); Evan H (So. Illinois).

Bon Voyage and Congratulations...
Nina L is off to attend Touro University in Nevada. Alex K is off to get a Master of Biomedical Sciences degree at Rutgers University.

Brain Food

VIDEO

[The Happy Secret to Better Work](#)

TED Talk with Shawn Achor

Does good productivity lead to happiness, or does happiness actually come first?

BOOK

[The Practicing Mind](#)

by Thomas M. Sterner

Developing focus and discipline in your life - master any skill or challenge by learning to love the process.

RESOURCES

[7 Amazing Places to Volunteer Abroad](#)

So if you did have time and resources to take your skills abroad, where would you go?

What are you reading? Send us your recommendations, and we may include them in an upcoming "Brain Food."

ScribeConnect
TeamConnect

P.O. Box 763
Idylwild, CA 92549
(855) 968-6372

SUBSCRIBE ONLINE:
ScribeConnect.com

ANALYSE THIS...

Sample HPI

Patient presents to ER with complaint of LLQ abdominal pain beginning yesterday. She states she was also in the ER last week for vomiting. Today, patient states she is nauseated, denies vomiting. Patient states that during her last ER visit she had labs drawn, CT abd/pelvis completed, and was discharged with Zofran which she states has not improved her nausea. She admits yesterday she began having a fever reaching 101 degrees F. She states she had back pain at her last ER visit and indicates it may have been from moving boxes. She complains of headache as well. Patient describes her pain today as "burning." She denies chest pain. Pt admits she had chest pain last week. She states she was given NTG for the pain. She described last week's pain as "sharp." Pt indicates she has photophobia with her headache. She denies recent head injuries.

According to an NCBI* article, the most common errors in HPI include: "Overemphasis on previous findings and diagnoses to the exclusion of the patient's symptoms; inappropriate description of the patient's complaints; failure to discriminate between main symptoms and symptoms of secondary importance; and failure to describe clearly the progression of the disease and the degree of resulting disability."

In terms of efficiency, the HPI is all over the place - jumping between her last ED visit and her current visit. It's difficult to clearly follow the progression of disease and symptoms as well as being able to distinguish which symptoms are present currently. It is also difficult to distinguish primary symptoms versus secondary associated symptoms. Also, I prefer to have my HPIs in 1-2 paragraphs or inputs, usually clicking terms from the template then adding a paragraph to paint the picture whereas this HPI has four different paragraphs or inputs. I think it's more efficient for us to have our thoughts grouped together in 1-2 paragraphs or inputs rather than 3+ to avoid confusion.

-Sasha Mozelewski
Southern Illinois Regional Manager, ScribeConnect

*The National Center for Biotechnology Information (NCBI) is part of the United States National Library of Medicine (NLM), a branch of the National Institutes of Health.